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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Tom's Landing LLC (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Delshre Lee (Name of Person)
Wyrough Law Office (Firm/Company)
12671 U.S. Hwy 98 W 217-1 (Address)
Miranar Beach FL 32550 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Debbre Lee at (850) 650 - 7797 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\begin{array}{c} \$130.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) \end{array} \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLO	RIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	
(Must end with the words "Limited Liability Company, "Limited Company," Limited Company, "Limited Comp	Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the prince	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
24453 U.S. Hwy 331 South Santo-Rosa Beach FL 32459	Same
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as its own Registere business entity with an active Florida registration.)	office, & Registered Agent's Signature: d Agent. You must designate an individual or another
The name and the Florida street address of the reg	istered agent are:
William E. Name	Wyrough, Ir.
12671 U.S. Hwy 9 Florida street addres	8W, 217-1
Miranar Bear City, State, and	Zip Zip
Having been named as registered agent and to accompany at the place designated in this registered agent and agree to act in this capacity. It is statutes relating to the proper and complete performance the obligations of my position as register	certificate, I hereby accept the appointment as I further agree to comply with the provisions of all rmance of my duties, and I am familiar with and
Registered Assent's Signature	06 HAY -8 PH 12: 20
(CONTINUE Page 1 of 2	PH 12: 20

<u>Title:</u> "MGR" = Mana "MGRM" = Ma	ger naging Member	Name and Address:	
mg-Rm		Thomas R. Stein as T Thomas R. Stein Revox 24453 U.S. Hwy 331 S Santa Rosa Beach FL 32	<u>~~.</u>
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LE V: Effective fective date is li days after the d	date, if other than the sted, the date must bate of filing.)	e date of filing: (OPT to specific and cannot be more than five busine	 IONAL) ss days į
(Use attachment LE V: Effective fective date is lid days after the	date, if other than the sted, the date must be ate of filing.) GNATURE: Signature of a member of this document const	er or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution ditutes an affirmation under the penalties of perjury	TONAL)
LE V: Effective fective date is li days after the d	date, if other than the sted, the date must be ate of filing.) GNATURE: Signature of a member of this document constitute the facts stated to th	er or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution ditutes an affirmation under the penalties of perjury	OS HAY -8